



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**INDEPENDENT/POLITICAL
COMMITTEE COVER PAGE**

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed
by the treasurer or designated record keeper

3. This Statement covers From: 11/27/07 To 12/31/08

1. Committee I.D. Number

137802

4. Committee's Mailing Address

**32068 Margaret Court
Warren, MI 48093**

2. Committee Name

Macomb Business United

Area Code and Phone (586) 413-6868

If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

5. Treasurer's Name and Residential Address

**Gust Ghanam
32068 Margaret Court
Warren, MI 48093**

Area Code and Phone (586) 413-6868

6. Treasurer's Business Address

N/A

7. Designated Record Keeper's Name and Mailing Address (If the committee has a Designated Record Keeper)

**Gust Ghanam
32068 Margaret Court
Warren, MI 48093**

Area Code and Phone (586) 413-6868

8. TYPE OF STATEMENT:

APPLICABLE TO INDEPENDENT AND POLITICAL
COMMITTEES REGISTERED ON STATE LEVEL

APPLICABLE TO INDEPENDENT AND
POLITICAL COMMITTEES REGISTERED
ON COUNTY LEVEL

APPLICABLE TO INDEPENDENT AND
POLITICAL COMMITTEES REGISTERED
ON

STATE AND COUNTY LEVEL

8a. TRIENNIAL STATEMENTS

Even Year

Odd Year

☐ April 25

☐ January 31

☐ July 25

☐ July 25

☐ October 25

☐ October 25

8d. ☒ ANNUAL STATEMENT
(2008 Coverage Year)

8e. ☐ PRE-ELECTION OR

8f. ☐ POST-ELECTION

Pre-Election or Post-Election
Statement relates to:

☐ PRIMARY

☐ GENERAL

☐ CONVENTION

☐ SCHOOL

☐ SPECIAL

☐ CAUCUS

Date of Election, Convention or Caucus:

8g. ☐ AMENDMENT TO CAMPAIGN
STATEMENT

(Complete Item 8a, 8b, 8c 8d, 8e, 8f or 8h
to indicate which Statement is being
amended)

8h. ☐ DISSOLUTION OF COMMITTEE

Effective Date of Dissolution

By checking this item, I/We certify that
the committee has no asset or outstanding
debts, including late filing fees. Further, I
request that if the dissolution cannot be
granted, that this be considered a request for
the Reporting Waiver.

Note: The disposition of residual funds must
be reported on Schedule 2B and the
Summary Page.

8b. QUARTERLY STATEMENTS

CAUCUS COMMITTEES (ONLY)

☐ January 31

☐ April 25

☐ July 25

☐ October 25

8c. ☐ SPECIAL ELECTION INDEPENDENT
EXPENDITURE REPORT

A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6 or 7 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. **If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement can not be waived.**

9. Verification: I certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my knowledge and belief the contents are true, accurate and complete.

Current Treasurer or

Gust Ghanam

Designated Record Keeper

Type or Print Name

Signature

Date

7/14/09



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 137802

2. Committee Name Macomb Business United

SUMMARY PAGE
INDEPENDENT OR POLITICAL COMMITTEE

RECEIPTS		Column I This Period	Column II Cumulative for Calendar Year
3. Contributions			
a. Itemized Contributions (Schedule 2A, Column 6 + Schedule 2A-2, Column 8)	(3a.) \$	<u>4,600.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>0.00</u>	(18.) \$ <u>39,100.00</u>
4. Other Receipts (Schedule 2A-1, Column 6)	(4.) \$	<u>0.00</u>	(19.) \$ <u>0.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add line 3c + Line 4)	(5.) \$	<u>4,600.00</u>	(20.) \$ <u>39,100.00</u>
IN-KIND CONTRIBUTIONS			
6. In-Kind Contributions	(6a.) \$	<u>0.00</u>	
a. Itemized (Schedule 2-IK, Column 7)	(6b.) \$	<u>NOT APPLICABLE</u>	
b. Unitemized (less than \$20.01 each - no Schedule)			
7. TOTAL IN-KIND CONTRIBUTIONS (Add Line 6a + Line 6b)	(7.) \$	<u>0.00</u>	(21.) \$ <u>0.00</u>
EXPENDITURES			
8. Expenditures	(8a.) \$	<u>3,720.00</u>	
a. Itemized Direct (Schedule 2B, Column 7)	(8b.) \$	<u>0.00</u>	
b. Itemized Get-Out-the-Vote (Schedule B-G, Column 6)			
c. In-Kind Expenditures- Purchase of Goods or Services (Schedule 2B-2, Column 7)	(8c.) \$	<u>0.00</u>	
d. Unitemized (less than \$50.01 each - no Schedule)	(8d.) \$	<u>0.00</u>	
e. Subtotal of Expenditures	(8e.) \$	<u>3,720.00</u>	(22.) \$ <u>37,366.80</u>
9. Independent Expenditures (Schedule 2B-1, Column 7)	(9.) \$	<u>0.00</u>	(23.) \$ <u>0.00</u>
10. TOTAL EXPENDITURES (Add Line 8e + Line 9)	(10.) \$	<u>3,720.00</u>	(24.) \$ <u>37,366.80</u>
IN-KIND EXPENDITURES			
11. In-Kind Expenditures- Endorsements, Donations or Loans of Goods or Services (Schedule 2B-2, Column 8)	(11.) \$	<u>0.00</u>	(25.) \$ <u>0.00</u>
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 2E)	(12a.) \$	<u>0.00</u>	
b. Owed to the Committee (Schedule 2E)	(12b.) \$	<u>0.00</u>	
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>853.20</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts - Column I)	(14.) +	<u>4,600.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) =	<u>5,453.20</u>	
16. Amount expended during reporting period (Line 10, Total Expenditures - Column I)	(16.) -	<u>3,720.00</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>1,733.20</u>	*

*If your ending balance is negative, please recheck your math.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 2A

INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 137802

2. Committee Name Macomb Business United

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).

6. Amount

7. Cumulative for
Calendar Year for Each
Contributor (Through
date of receipt)

3. Contribution # 1

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 12/17/08

Name & Address:

Fadi Hanna
13720 Strathmore
Shelby Twp., MI 48315

\$ 250.00

\$ _____

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation Engineer Employer Chrysler

Business Address 1000 Chrysler Drive, Auburn Hills, MI 48326

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 2

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 12/17/08

Name & Address:

Grant Gartrell
209 McMillan
Grosse Pointe Farms, MI

\$ 150.00

\$ _____

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer CDM Construction

Business Address 1 Woodward Ave., Ste. 1500, Detroit, MI 48226

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 3

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 12/17/08

Name & Address:

Mark Tenbroek
3744 W Huron River Dr.
Ann Arbor, MI 48103

\$ 250.00

\$ _____

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer CDM Construction

Business Address 1 Woodward Ave., Ste. 1500, Detroit, MI 48226

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 4

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 12/17/08

Name & Address:

Anthony Penna
37351 Willow Lane
Clinton Twp., MI 48036

\$ 400.00

\$ _____

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation Attorney Employer Russi & Penna

Business Address 11662 Martin Rd., Warren, MI 48093

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal \$1,050.00

Grand Total of All Schedules 2A
(Complete on last page of Schedule)

Enter this total
on line 3a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 2A

INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 137802

2. Committee Name Macomb Business United



Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).		6. Amount	7. Cumulative for Calendar Year for Each Contributor (Through date of receipt)
<p>3. Contribution # 1 Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>12/17/08</u> Name & Address: <u>Eddie Babbie</u> <u>1183 Congress Drive</u> <u>Troy, MI</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Babbie Developers</u> Business Address <u>32784 Ryan Road, Warren, MI 478092</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>500.00</u>	\$ _____
<p>3. Contribution # 2 Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>12/17/08</u> Name & Address: <u>Salah Zoma</u> <u>4312 Hickory Court</u> <u>Orchard lake, MI 48323</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer <u>Professional Engineering Services</u> Business Address <u>220 Bagley Ste. 930, Detroit, MI 48226</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>500.00</u>	\$ _____
<p>3. Contribution # 3 Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>12/17/08</u> Name & Address: <u>Sam Zeer</u> <u>5800 Meikle Ln.</u> <u>Las Vegas, NV 89156</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer <u>Zeer Developments</u> Business Address <u>15868 Turin, Las Vegas, NV 89156</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>500.00</u>	\$ _____
<p>3. Contribution # 4 Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>12/17/08</u> Name & Address: <u>Augeen Kalasho</u> <u>42697 Pond View Drive</u> <u>Sterling Heights, MI</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer <u>Buscemis</u> Business Address <u>22125 Van Dyke, Warren, MI 48089</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>250.00</u>	\$ _____

Page Subtotal \$1,750.00

Grand Total of All Schedules 2A
(Complete on last page of Schedule)

Enter this total
on line 3a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 2A

INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 137802

2. Committee Name Macomb Business United

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).

6. Amount

7. Cumulative for
Calendar Year for Each
Contributor (Through
date of receipt)

3. Contribution # 1

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 12/17/08

Name & Address:

Peter Torrice
25820 Maritime Circle
Harrison Twp., MI 48045

\$ 200.00

\$ _____

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation attorney Employer Canu, Zaluski, Torrice

Business Address 32059 Utica Rd., Fraser, MI 48026

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 2

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 12/17/08

Name & Address:

Amer Shaba
49727 Decker Rd.
Shelby Twp., MI 48317

\$ 300.00

\$ _____

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer Professional Engineering Services

Business Address 220 Bagley Ste. 930, Detroit, MI 48226

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 3

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 12/17/08

Name & Address:

Bashar Zetouna
48901 Villa Doro Ct.
Shelby Twp., MI 48315

\$ 250.00

\$ _____

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer Ryan's Market

Business Address 1837 Pine Grove, Port Huron, MI 48060

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 4

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 12/17/08

Name & Address:

Arthur Choulagh
3072 Mangrove Dr.
Sterling Heights, MI 48314

\$ 250.00

\$ _____

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer A7B Liquor Shoppe

Business Address 1807 E Nine Mile, Eastpointe, MI 48021

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal \$1,000.00

Grand Total of All Schedules 2A
(Complete on last page of Schedule)

Enter this total
on line 3a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 2A

INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 137802

2. Committee Name Macomb Business United

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).		6. Amount	7. Cumulative for Calendar Year for Each Contributor (Through date of receipt)
<p>3. Contribution # 1 Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>12/17/08</u> Name & Address: Khalid Zaitouna 4325 Marywood Troy, MI 48085</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>business owner</u> Employer _____ Business Address <u>2510 Van Dyke, Sterling Heights, MI 48310</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>200.00</u>	\$ _____
<p>3. Contribution # 2 Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>12/17/08</u> Name & Address: Ronald Frnech 319 Claymont Cove Court Ballwin, MO</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer <u>CDM Construction</u> Business Address <u>1 Woodward Ave, Ste. 1500, Detroit, MI 48226</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100.00</u>	\$ _____
<p>3. Contribution # 3 Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt <u>12/17/08</u> Name & Address: Hiethem Choulagh 1302 Pond View Sterling Heights, MI 48089</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer <u>A&B Liquor Shoppe</u> Business Address <u>14405 E. Nine Mile Road, Warren, MI 48089</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>500.00</u>	\$ _____
<p>3. Contribution # 4 Is this contribution from a PAC? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address: _____ _____ _____</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		\$ _____	\$ _____

Page Subtotal **\$800.00**

Grand Total of All Schedules 2A
(Complete on last page of Schedule) **\$4,600.00**

Enter this total
on line 3a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED DIRECT EXPENDITURES
SCHEDULE 2B
INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 137802
Macomb Business United
2. Committee Name _____

3. Name and address of person or vendor to whom the expenditure was made	5. Candidate or Ballot Question Information	6. Date	7. Amount	8. Cumulative for Election or Election Cycle
Expenditure #1 Name & Address: Andiamo Banquet Center 7096 E. 14 Mile Road Warren, MI 48092 4. Purpose: <u>Fundraiser</u> <input checked="" type="checkbox"/> Fund Raiser	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County <input type="checkbox"/> Ballot Proposal <input type="checkbox"/> Check box if expenditure is payment of Debt or Obligation reported on previous statement	<u>12/17/08</u> Date	\$ <u>3720.00</u>	\$ _____
Click Here for Memo Itemization Type				
Expenditure #2 Name & Address: 4. Purpose: _____ <input type="checkbox"/> Fund Raiser	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County <input type="checkbox"/> Ballot Proposal <input type="checkbox"/> Check box if expenditure is payment of Debt or Obligation reported on previous statement	_____ Date	\$ _____	\$ _____
Click Here for Memo Itemization Type				
Expenditure #3 Name & Address: 4. Purpose: _____ <input type="checkbox"/> Fund Raiser	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County <input type="checkbox"/> Ballot Proposal <input type="checkbox"/> Check box if expenditure is payment of Debt or Obligation reported on previous statement	_____ Date	\$ _____	\$ _____
Click Here for Memo Itemization Type				
Expenditure #4 Name & Address: 4. Purpose: _____ <input type="checkbox"/> Fund Raiser	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County <input type="checkbox"/> Ballot Proposal <input type="checkbox"/> Check box if expenditure is payment of Debt or Obligation reported on previous statement	_____ Date	\$ _____	\$ _____
Click Here for Memo Itemization Type				

Subtotal this page **\$3,720.00**

Grand Total of all Schedules 2B
(Complete on last page of Schedule)

\$3,720.00

Enter this total
on line 8a of the
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**FUND RAISER SCHEDULE 2F
INDEPENDENT OR POLITICAL COMMITTEE**

1. Committee I.D. Number 137802
2. Committee Name Macomb Business United

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>12/17/08</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>100</u>	5. Type of Fund Raising Activity <u>Raise money for PAC</u>	6. Address and Name (if any) of the place where the activity was held <u>Andiamo 7096 E. 14 Mile Road Warren, MI 48092</u> <input type="checkbox"/> Private Residence
---	--	--	--

7. Total Contributions \$4,600.00
8. Other Receipts \$0.00
9. Gross Receipts (Add lines 7 and 8) \$4,600.00
10. Total Cost of Event \$3,720.00

*Includes In-Kind Contributions and All
Expenditures Made For the Event

11. ☐ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Direct Contributions Schedule (2A), Itemized In-Kind Contributions Schedule (2-1K), Itemized Expenditures Schedule (2B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.